

ONARD BLOOM & ASSOCIATE LLC  
401 Washington Avenue, Suite 905  
Towson, Maryland 21204

DOCKET NO. 98618-PA

DECLARATION AND POWER OF ATTORNEY - ORIGINAL APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled CELL-CULTURE AND POLYMER CONSTRUCTS, the specification of which

(check one) ☒ [ X] is attached hereto,  
☐ [ ] was filed on \_\_\_\_\_

as Application Serial No. \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

| COUNTRY | APPLICATION NUMBER | DATE OF FILING<br>(day, month, year) | PRIORITY CLAIMED                                                 |
|---------|--------------------|--------------------------------------|------------------------------------------------------------------|
|         |                    |                                      | <input type="checkbox"/> [ ] YES <input type="checkbox"/> [ ] NO |
|         |                    |                                      | <input type="checkbox"/> [ ] YES <input type="checkbox"/> [ ] NO |

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

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|--------------------|--------------------------------------|------------------------------------------|
|                    |                                      |                                          |
|                    |                                      |                                          |

POWER OF ATTORNEY: As a named Inventor, I hereby appoint the following attorney(s) to prosecute this application and transact all business in The Patent and Trademark Office connected therewith:

LEONARD BLOOM - Reg. No. 18,369  
JAMES R. GAFFEY - Reg. No. 20,259

ROBERT M. GAMSON - Reg. No. 32,986  
SAM ROSEN - Reg. No. 37,991

SEND CORRESPONDENCE TO: LEONARD BLOOM & ASSOCIATES, LLC, 401 Washington Avenue, Suite 905,  
Towson, Maryland 21204 (410) 337-2295

|     |                            |                                                                     |                                      |                                  |
|-----|----------------------------|---------------------------------------------------------------------|--------------------------------------|----------------------------------|
| 201 | FULL NAME<br>OF INVENTOR   | FAMILY NAME                                                         | FIRST GIVEN NAME                     | SECOND GIVEN NAME                |
|     | RESIDENCE &<br>CITIZENSHIP | CITY                                                                | STATE OR FOREIGN COUNTRY             | COUNTRY OF CITIZENSHIP           |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS                                                 |                                      |                                  |
| 202 | FULL NAME<br>OF INVENTOR   | FAMILY NAME                                                         | FIRST GIVEN NAME                     | SECOND GIVEN NAME                |
|     | RESIDENCE &<br>CITIZENSHIP | CITY                                                                | STATE OR FOREIGN COUNTRY             | COUNTRY OF CITIZENSHIP           |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS                                                 |                                      |                                  |
| 203 | FULL NAME<br>OF INVENTOR   | FAMILY NAME                                                         | FIRST GIVEN NAME                     | SECOND GIVEN NAME                |
|     | RESIDENCE &<br>CITIZENSHIP | CITY                                                                | STATE OR FOREIGN COUNTRY             | COUNTRY OF CITIZENSHIP           |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS                                                 |                                      |                                  |
| 204 | FULL NAME<br>OF INVENTOR   | FAMILY NAME<br>SHIKANI                                              | FIRST GIVEN NAME<br>Alan             | SECOND GIVEN NAME<br>H.          |
|     | RESIDENCE &<br>CITIZENSHIP | CITY<br>Ruxton                                                      | STATE OR FOREIGN COUNTRY<br>Maryland | COUNTRY OF CITIZENSHIP<br>U.S.A. |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS<br>11 Johnson Mill Road, Ruxton, Maryland 21204 |                                      |                                  |
| 205 | FULL NAME<br>OF INVENTOR   | FAMILY NAME                                                         | FIRST GIVEN NAME                     | SECOND GIVEN NAME                |
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201

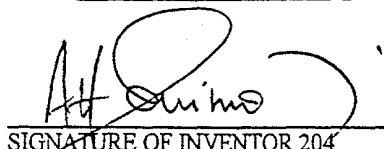
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SIGNATURE OF INVENTOR 206

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|     | RESIDENCE & CITIZENSHIP | CITY<br>Efrat                                               | STATE OR FOREIGN COUNTRY<br>ISRAEL | COUNTRY OF CITIZENSHIP<br>ISRAEL |
|     | POST OFFICE ADDRESS     | POST OFFICE ADDRESS<br>16 Migdal Eder Street, Efrat, ISRAEL |                                    |                                  |
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Abraham T. Domb

March 24, 1999

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LEONARD BLOOM & ASSOCIATES, LLC

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| 201 | FULL NAME<br>OF INVENTOR   | FAMILY NAME<br>Hungerford                                                  | FIRST GIVEN NAME<br>David            | SECOND GIVEN NAME<br>S.          |
|     | RESIDENCE &<br>CITIZENSHIP | CITY<br>Cockeysville                                                       | STATE OR FOREIGN COUNTRY<br>Maryland | COUNTRY OF CITIZENSHIP<br>U.S.A. |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS<br>10715 Pot Spring Road, Cockeysville, Maryland 21030 |                                      |                                  |
| 202 | FULL NAME<br>OF INVENTOR   | FAMILY NAME<br>Fronzoza                                                    | FIRST GIVEN NAME<br>Carmelita        | SECOND GIVEN NAME<br>G.          |
|     | RESIDENCE &<br>CITIZENSHIP | CITY<br>Woodstock                                                          | STATE OR FOREIGN COUNTRY<br>Maryland | COUNTRY OF CITIZENSHIP<br>U.S.A. |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS<br>9707 Slalom Run Drive, Woodstock, Maryland 21163    |                                      |                                  |
| 203 | FULL NAME<br>OF INVENTOR   | FAMILY NAME<br>Sohrabi                                                     | FIRST GIVEN NAME<br>Afshin           | SECOND GIVEN NAME                |
|     | RESIDENCE &<br>CITIZENSHIP | CITY<br>Columbia                                                           | STATE OR FOREIGN COUNTRY<br>Maryland | COUNTRY OF CITIZENSHIP<br>U.S.A. |
|     | POST OFFICE<br>ADDRESS     | POST OFFICE ADDRESS<br>9351 Westering Sun, Columbia Maryland 21045         |                                      |                                  |
| 204 | FULL NAME<br>OF INVENTOR   | FAMILY NAME                                                                | FIRST GIVEN NAME                     | SECOND GIVEN NAME                |
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x *David A. Hungerford*  
SIGNATURE OF INVENTOR 201  
*Hungerford*

DATE 3/17/99

x *Carmelita G. Mendoza*  
SIGNATURE OF INVENTOR 202  
*Mendoza*

DATE 3/17/99

x *Alta Sohrabi*  
SIGNATURE OF INVENTOR 203  
*Sohrabi*

DATE 3/17/99

\_\_\_\_\_  
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